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Problems in the Placement of Illegitimate Children

By FLORENCE CLOTHIER, M.D.

Psychiatrist, New England Home for Little Wanderers, Boston, Massachusetts

APPROXIMATELY 70,000 illegitimate babies are born in this country each year. Of these, only a relatively small proportion is placed in infancy for adoption. In our culture an adoptive home has inherent in it a greater possibility of offering a normal traditional home background than has any other plan yet worked out for the illegitimate child. The responsibility which comes with binding legal ties gives a back-log of security and permanence which the child needs to grow into a man. The child relatively untraumatized by his environment who is selectively placed in an adoptive home within the first year of life, has the opportunity of passing through a normal Oedipal relationship with father and mother substitutes. He has the possibility of establishing essentially normal masculine and feminine identifications. Adoptive parents can serve these children, whom they have nurtured since infancy, as love objects, on whose personalities as frameworks the children can mold from their own constitutional stuff their own individual personalities.

Do not think for a moment that I recommend that all illegitimate babies should be placed for adoption in infancy. I say merely that the adoptive home has the possibility of offering the illegitimate child a background experience more nearly parallel to the background experience of legitimate children brought up with their own parents than has any other placement plan for the illegitimate child. Adoption is full of hazards, both gross and subtle, and selective adoption placement is an art like medicine, not to be divorced from scientific understanding. Its practice should be a specialty in the profession of social work. Its procedures, techniques and problems lie outside the scope of this paper. The overwhelming majority of illegitimate babies are either not suitable for permanent placement with the type of family who apply to adopt a baby, or they are ineligible for adoption because the natural mother hopefully or guiltily or aggressively or under outside coercion, retains cus-

tody of her child. While she struggles to support the child and to find a satisfactory life for herself, all important character-forming months in the life of the child are passing. What is happening to the child and his experiences with people are establishing personality patterns which will modify his whole future life. By the time a child is two or three or four years old he has been influenced by his environment and he is no longer able to find, even in the best circumstances, in an adoptive home quite the equivalent of life with own parents. Adoption must remain only a very small part of the answer to society's problem—how to care for the illegitimate child.

The vast majority of illegitimate children are cared for in one of three ways—often unfortunately successively in all three ways. They remain with their mothers or maternal relatives. They pass from infancy to childhood in institutions or they are boarded out in foster homes selected by the mother or by a public or private agency. The social worker responsible for the unmarried mother has a deep responsibility for the whole future of that unmarried mother's child. For if the social worker has become an integral part of the client's life—as she must if she is to be anything more than a glorified messenger boy or a punitive arm of society—her influence on the mother's decision what to do with her baby will be great. Since there is as yet no right answer what to do with the illegitimate baby the social worker is faced with the problem—what seems to be the least wrong thing to do and what plan, under the circumstances, is most likely to offer the baby a permanent, stable environment? Where will the child find mother and father figures which he can use to strengthen his own weak ego and with whom he can experience early social relationships? Where has he the best chance of being loved and of giving love? Where will there be the greatest motivation for finding satisfactions in creative or constructive sublimations and in tender, affectionate relations rather than in immediate, di-

rect gratifications of impulses and in destructive aggressive activity? In other words, always bearing in mind how the child develops emotionally, what plan has the best chance of leading to his satisfied acceptance of social responsibilities?

Whatever plan the social worker and the natural mother do decide upon for the child, let it be, if humanly possible, permanent. Changes and replacements, especially during the first seven years of life, may in themselves be fully as destructive to the child's developing personality as an obviously bad situation. So let me repeat, decide upon the best plan possible under the circumstances, bring continual influence to bear on the usually immature and often irresponsible mother to accept and stick to this plan, and lend all possible support over a period of years to helping it to work out. No social worker dealing with unmarried mothers should feel justified in closing a case until the child is fully launched in the most secure, permanent environment possible for him—*i. e.*, until he is six or seven years old. During that time the social worker's efforts may be directed towards the mother and maternal relatives, or towards the child, or towards foster parents or institution matrons, or towards several of them.

For some illegitimate infants the best or the only possible plan under the circumstances may be for the mother and maternal relatives to care for the child. When there is a reasonable chance that with the mother or maternal relatives there will be security for the baby and fulfillment of his needs, steps should be taken, even before his birth, to prepare his family for the problems which inevitably must arise in the rearing of a child whose status in life is unsanctioned by society and the subject of idle and vicious gossip by the community.

The experience of social workers associated with children's agencies is that unmarried mothers, with rare exceptions, are incapable of providing sustained care and security for their illegitimate babies. When the unmarried mother is bound to her child by an infantile need of love or by ties of guilt and aggression rather than by tenderness, affection and generous love, the economic and emotional strain of bringing up a child whose existence jeopardizes her standing in the community far outweighs any possibility of satisfaction from the child. She loses interest or becomes frankly hostile. The child is neglected and rejected and often eventually forced to suffer placement and replacements. His emotional deprivations interfere with his social development and he presents behavior problems which, in turn, cause further rejections and more replacements.

George is an illegitimate boy of twelve-and-a-half years who was referred to The New England Home for Little Wanderers at the insistence of the school authorities. Though of normal intelligence he was doing very poorly in his school work and was extremely disturbing in the schoolroom. He was unable to get along with other children and continually accused them of making faces at him or picking on him. He provoked fights with other boys and was utterly disrespectful to his women school teachers. He swore at them and called them obscene names. When they left the room, he inferred to other boys that they had done so in order to go to the bathroom or to engage in some sexual activity. His chief satisfactions came from attention-getting, show-off behavior. On several occasions he truanted from school. George was regarded as a poor influence in the community because of his tendency to rummage through parked cars, sometimes stealing and sometimes destroying objects found in them. He stole toys from the 5-and-10-cent store and small sums of money from his family.

George's adjustment to the Study Home was essentially similar to his poor adjustment at school and in the community. It was noted also that he was aggressive and cruel with younger children and very much on the defensive against any sort of intimate relationship with an adult. His rudeness to the matron and governesses could only be described as extravagant. He seemed to be actively and viciously defending himself against any admission of a need or longing for tenderness and affection from a woman.

George's mother was an immature girl of 19 at the time of his birth. She was the youngest of a large family and her parents both died when she was a small child. She was brought up by an older married sister, Mrs. H., who had children of her own. George's mother was not regarded as wild but rather as a quiet, civil, well-disposed girl. It was a shock and a disgrace to all her family when she became pregnant by a policeman—a middle-aged married man. One cannot but suspect that this pregnancy was the result of a fatherless girl's unconscious effort to find a father-figure. In adolescence she may have tried to create in reality an emotional relationship of an intensity comparable to her fantasized relationship to her father-ideal.

Mrs. H., now a widow, insisted that the mother and baby should live with her and her almost grown-up children. To avoid neighborhood gossip she moved to a new community. Without benefit of law George was given Mrs. H.'s surname and brought up under the fiction that she was his mother and that his mother was his aunt. Except for George, everyone in the household knew the facts of his birth. Mrs. H. was a dominating, aggressive, efficient person who kept her large family well under her wing and, at the same time, managed to work as cook in a restaurant. The family consisted of the mother, now 31 years old, Helen H., 29 years old, now married and living in the home with her husband and 4-year-old boy and Frank H., now 27, living at home and, for the most part, unemployed. The mother was never interested in George and seldom paid any attention to him except to resent his boisterous behavior. Frank, who merely tolerated George, actually had most of the care of him and was given the responsibility for disciplining him, which he carried out with a strap. Helen and her husband regarded George as a menace to their own child and a poor influence.

Because of Mrs. H.'s need to work outside the home and the mother's lack of interest and intermittent employment, George had four different temporary foster home placements during his first seven years. Between these stop-gap placements he lived with his aunt, Mrs. H., whom he regarded as his mother. When he was eight years old he was placed in a small boarding school environment for part of a school year—as long as Mrs. H. could afford to keep him there. At eleven, because of the school problem he presented, he was sent to a Catholic institution. After a few months he ran away, an act which Mrs. H. condoned, saying that the Brothers did not give him adequate physical care. Mrs. H. and the natural mother changed jobs frequently, which led to the family's moving many times. George has attended eleven different schools in all. In view of this history it is not surprising that he was not interested in school and presented personality problems. Mrs. H.'s consent to his being studied at the New England Home for Little Wanderers was given only on condition that he would not be told of his true parentage. She felt that the antagonism between the mother and the boy was such that it would break up the home should he ever discover that his despised "aunt" and not Mrs. H. was his mother.

In studying George it very soon became evident that, though he did not know precisely what was wrong with his status in life, he

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strongly suspected something "phony." The Matron remarked on his constant snooping around. He himself said: "I always want to know what's going on." Just as at school he accused children of making faces at him, he thought that at the Study Home people were talking about him. He made elaborate efforts to get hold of his record. Once, after Frank came to see him, someone asked him: "Was that your brother or your father or who?" His first reply was: "I dunno," which he amended to, "Oh, I just forgot for a minute. He's my brother." Once he was telling of his pleasure in making people mad and was asked: "How about your mother? Do you like to make her mad, too?" He replied, belligerently, "Oh, not her. She's the only mother I got, isn't she?"

George was undoubtedly consumed with curiosity about himself and his family and, at the same time, shaken with fear of what satisfaction of that curiosity might bring him. He struggled for appreciation and a place in the sun, but was so insecure that he could not allow himself to be drawn into a warm relationship with an adult. His suspicions of his family's attitude towards him extended to suspecting that the world "had something on him." George's problems and conflicts illustrate in an exaggerated form the problems of many illegitimate children who remain in the care of maternal relatives.

In Massachusetts the strong tendency in recent years has been to avoid having children grow up in institutions. All who heard Dr. Lowrey's paper, "*Personality Distortion and Early Institutional Care*," and Dr. Deming's discussion of it at the 1940 orthopsychiatric meetings, are well aware of the wisdom of the Massachusetts policy of attempting to eliminate institutional care for infants and small children. Let me merely emphasize the points which emerge from Dr. Lowrey's study:

1. These children suffer from isolation factors, including D. M. Levy's 'affect hunger.'
2. The pattern of behavior is an accentuated example of that accompanying rejection.
3. The children seem to remain fixed in the oral sadistic stage of development.
4. They are unprepared for and unequal to the demands of a family setting.
5. Infants should not be reared in institutions."

We have under care in a foster home at the present time a five-year-old illegitimate boy, David, with an I. Q. of 100. He was born in a state infirmary while his mother was serving a combined sentence for larceny, drunkenness, lewd and lascivious cohabitation at a reformatory for women. He lived for the first three-and-a-half years of his life in the children's unit of the reformatory. It was felt that he might be a stabilizing influence for his mother when she was finally ready for parole. His physical development in the institution was excellent, but his aggressive behavior was a matter of some concern to the nurses. Upon the mother's discharge from the institution David was placed in a foster home and a job was found for his mother so that she could be responsible for his board. Within a few months David had to be moved because of his negativism and inability to get along with other children. His tendency to bite was only one manifestation of his aggressiveness. A new foster home was found for him where he was the only and adored child of an elderly widow. David was fully accepted in this home, in spite of his insistence on having his own way and in spite of his inability to accept any other standard of behavior than "I want" or "I don't want."

The mother soon stopped paying his board. After filing marriage intentions with two different men at the same time, she married a boy twelve years her junior and when David was four she took him home to live with her to save money. Here he was abominably mistreated. He slept either in the cold attic or in the bedroom with his mother and young stepfather. He was cruelly punished for trivial misdemeanors and was beaten. He was dirty

and neglected. The contrast between his life with his mother, with whom there was no love relationship, and his life with the over-indulgent foster mother who asked and expected nothing of him, was so marked that it is natural that David presented serious conduct disorders. He began to steal and begged on the streets. The Society for the Prevention of Cruelty to Children finally investigated and David was referred to the New England Home for Little Wanderers for study and suggestions as to a permanent plan for his future. The mother and stepfather, in order to avoid paying board for David, maintained that they can offer the child a home and that he will not be mistreated. It is difficult to prove neglect in court and it is doubtful that David would be eligible for state care, though it is recognized by all who have had any dealings with the mother that she is totally incompetent to care for him. It seems unlikely that money will be available from the mother and stepfather to maintain his board away from home. From David's point of view it would certainly seem that adoption might offer him a greater chance of permanence and security than any other possible plan. However, in view of his heredity, experiences and present personality, it is doubtful that any prospective adoptive parents would wish to take him into their home. When one considers the traumatic situations which he has had to face in his brief life and which have produced distortions in his personality, one can recognize that he is, at present, much less adoptable than he would have been in infancy. During a temporary stay at the Study Home David acted like a spoiled, pampered child, accustomed to having his own way. Like the cases described by Dr. Lowery, David showed no ability to accept frustration. Although cute and presentable, he did not establish the type of relationship with people which would lead him to accept happily some limitation of his own freedom. David should be regarded as a child whose social development was grossly hampered by his early institutional life and by his subsequent insecurity and rejections.

The illegitimate child, if he is to accept realistically and without too deep disturbance the facts regarding his birth, needs even more than the own child to grow up with the reassuring conviction that he is wanted and loved, no matter what he does. Some illegitimate children who present problems do so in part to test the depth of acceptance and love which substitute parents or teachers have for them. The foster home, by its very nature, cannot measure up to the own home. It cannot supply the quality of belonging or being irrevocably a part of the home which is the very stuff of family life. It can offer all the external features of family life and it can meet some of the child's subtler needs but it cannot supply the child with permanent kith and kin. However, when own parents have failed or will inevitably fail and when early adoption has not taken place or has been inadvisable, foster home care is the best answer we yet know to the problem of how to care for the young, dependent child. Our foster home care, as practised at the present time, is still far from being as good as theoretically it could be. (In some special cases it undoubtedly produces far better results than we have any reason to expect it should.) Foster home care's chief liability is its lack of permanence and lack of insight into the particular problems with which the foster child is faced. The fact that foster parents, without deep suffering themselves, can give up a child because of the advent of a relative or the need to

(Continued on page 8)

BULLETIN

Published monthly (omitted in July and August) as the official organ of the Child Welfare League of America.

Henrietta L. Gordon, *Editor*

The Bulletin is in large measure a Forum for discussion in print of child welfare problems. Endorsement does not necessarily go with the printing of opinions expressed over a signature.

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A Measuring Stick for Child Placing Agencies

"STANDARDS for Organizations Providing Foster Family Care" is now being printed. It is a radical revision of an earlier pamphlet carrying the same title. This publication of the League should help Board members, executives and case workers of child placing agencies to gauge goal and quality of the work for which they each carry both similar yet different responsibilities.

This pamphlet embodies a thoughtful and detailed presentation of present-day purpose and practice in child placement. While it offers very practical goals of achievement at which the child placing agency may aim, and some very definite "musts" for the agency which wants to meet minimum standards, it also represents thinking that may be considered controversial and which in any event should challenge many practices.

The goal of child placement is part of the larger goal of child welfare. It is so regarded in this publication. The point is well put by Henry W. Thurston, who maintains that true child welfare standards must always be to develop each child to the level of his potential capacity. To this end parents are coming into their own in the placement situation. One of the aims of placement is to help the parent decide how much parental responsibility he can and wants to assume, and how soon. From intake we must be aware of this, and help the parents decide whether they want placement.

Here are some of the criteria set for an agency:

1. It must define its purpose and see to it that founded on acceptable child care principles it meets a real need in the community.
2. It must help child and parent find out whether placement is the way in which they want to solve their problem.
3. Its supervision of children must be continuous and allow for necessary ultimate growth experiences.

4. It must see that children who can, get home to their people as soon as possible.
5. The responsibility of Executive and the Board in defining the function of agency, selection of staff and community relationship is clearly related to the quality of service children will receive.

Give this new pamphlet your attention, then discussion and criticism, for it is such thinking in the profession that effects advances in practice.

The aim of the League is to add scope to child welfare and raise standards of performance through stimulating education, the agency always being free to re-define, evaluate, and modify its purpose and practice in terms of community and professional standards. The Standards should further this purpose.

—HENRIETTA L. GORDON

Financial Statement of the League

For the Fiscal Year January 1 to December 31, 1940

RECEIPTS	
Russell Sage Foundation.....	\$9,004.00
Contributions.....	11,451.59
Reimbursements for Services and Other Refunds.....	946.56
Agency Membership Dues and Organization Quotas..	15,544.02
Associate Dues.....	1,950.00
Net Gain on Distribution of Publications.....	299.97
Miscellaneous.....	4.07
TOTAL CURRENT RECEIPTS.....	\$39,200.21

DISBURSEMENTS

Salaries	
Service Staff.....	\$14,655.18
Clerical Staff.....	6,229.82
Office Expense	
Rent.....	2,205.96
Telephone and Telegraph.....	675.40
Stationery and Supplies.....	1,639.08
Office Equipment.....	34.94
Postage.....	872.57
Travel and Maintenance	
Regular.....	2,910.28
Miscellaneous	
Audit and Insurance.....	268.05
Bulletin.....	1,219.05
Conferences.....	266.77
Contributions to Organizations.....	1,135.00
Library.....	990.03
Publicity.....	116.00
Special Appeals.....	2,041.37
Special Projects.....	1,616.96
Miscellaneous.....	209.39
TOTAL CURRENT DISBURSEMENTS.....	\$37,085.85
Net Excess of Income over Expenses.....	2,114.36
	\$39,200.21

WALTER M. BROWN, *Treasurer*

Audited by Byrnes and Baker

March, 1941

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Babies in Foster Homes

"THE HOMEFINDER," a publication for foster parents, has been resumed by the Foster Home Bureau of the New York Association for Jewish Children, 329 East 62d Street, New York City, for distribution to the 1350 foster parents who are caring for 2000 children living in Greater New York and nearby communities. "The Homefinder" aims to keep foster parents in touch with developments of the work of the Bureau, to serve as a medium for foster parents and workers to share their experiences with children, and to stimulate foster parent activity toward finding new homes. The March number of "The Homefinder" is devoted to the specialized work of the Baby Department.

"This department was added back in 1929. We now recall what a serious step we considered this to be. Could we entrust babies to the care of mothers without a nurse in constant attendance? Would mothers be willing to assume responsibility to care for strange babies, especially when they might not stay on to grow up in their homes? Succeeding years have proven that it can be done.

"In the last twelve years the Foster Home Bureau has cared for 499 babies under two years of age in foster homes. The babies have had a remarkably good health record because of the foster mothers' splendid cooperation with our nurses and doctors. The social workers carry an active part of this program through their interpretation of the agency's work to both foster parents and parents. The social and mental development of the babies compares favorably with that of children raised in their own homes. Even in early infancy, one can observe a definite personality.

"Let Sonny tell his story:

"I've just celebrated a birthday. I was six months old today. Things were pretty bad for me at first, but everything has turned out fine. I weighed only four pounds when I was born. I was pretty weak and sick. The doctors couldn't seem to find a formula to agree with me, but I had plenty of fight in me and I knew I'd stick it through. My mommy, too, was very sick and couldn't take care of me at all. You can imagine how my daddy felt about all this. He didn't know where to turn, till somebody told him about the Foster Home Bureau. He found out how babies are placed in foster homes, that a social worker visits and a nurse comes too, and there is a doctor to see about the formula and all the care a baby needs. That seemed like a good idea to both of us, so dad made all the arrangements and brought me to the Foster Home Bureau.

"I wish I had time to tell you all that's happened since then. It seems so long ago; I was only two months old then. Things seemed sort of mixed up at first. I'd never been out before and it was so cold and bright and noisy. But when I got to the Foster Home Bureau, I was put in a nice, comfortable crib and a lady (who I later learned was my social worker) picked me up and cuddled me and made me feel safe. Then I was weighed and I met Dr. M. He was sure I'd get along fine and started me off on a new formula. He said I should get more cod liver oil and I could start having orange juice. This

was all very well, but suddenly I wondered how I would get my next bottle. I was hungry and frightened and you couldn't blame me for crying. Just then another lady came in. My social worker introduced us saying, "This is your new little foster son." The new lady picked me up and held me close and she talked to me softly while she put on my new sweater. Suddenly, I was sure that I would get my next bottle and I stopped crying.

"Before we left, the doctor explained to my foster mother about the formula and told her that a nurse would visit me in the morning. He said goodbye and told me to come back to see him in the clinic in four weeks. Then my foster mother and I got into a cab with my bundles. I had a complete layette including everything from diapers to bottles, and a new carriage. At my foster home, I found another nice, warm crib all ready and the whole family waiting for me. Betty and Shirley, my new foster sisters, made a great fuss over me. My foster daddy said I looked like a smart kid to him. We understood each other right away. Why, the next morning, we had so much to talk about together that he was late for work. I have been very happy here, and, believe it or not, I gained ten pounds in the last four months. When I come into the clinic now, the doctor pats my back and says I am big and strong enough now so that he can start the needles which, he says, will protect me from whooping cough and diphtheria.

"And that is not all. My daddy has been visiting me every week, and yesterday he told me of a wonderful surprise. My own mommy is finally getting better and in a few months she will be strong enough to leave the hospital and we can all be together again. My foster family is very pleased too, and proud that they can return a happy, healthy baby to my mommy and daddy. We will never forget each other, and I will always be happy when I think of the love and care they gave me. I thank them with my sweetest smiles and coos. So you see, even though there was plenty to worry about at first, my story has a happy ending."

Infants need a substitute mother when their own cannot care for them.

Babies need not only good physical care but a social worker who pads the bumpy road from the very start and so helps with matters of emotional and social growth.

And, lastly, the foster family and agency work together in getting the child back to his own family as soon as circumstances permit.

READERS' FORUM**DEAR EDITOR:**

Students had been stimulated by a panel discussion concerning "Children in a Democracy," conducted in Dorothy Hutchinson's introductory course in child welfare, to consider how the possible retrenchment in social services which the present crisis will bring can be prevented. How can we go one step further and aid in the expansion of these services at a time when there is such desperate need? Concern with this problem led a student group from the New York School of Social Work to plan a course of action.

From their specific interest in child welfare services there grew a desire to include all social services in their thinking. As the plan proceeded, both faculty members and alumni were asked to participate. They have shown tremendous interest in the project. The first step is a conference to maintain and extend social services to be held on March 29, at the Manhattan Trade School, 129 East 22nd Street, New York City. What are other schools of Social Work doing about this matter?

Sincerely yours,

EARL MARTIN, Publicity Director, Conference to
Maintain and Extend Social Services

THE BOARD MEMBER SPEAKS—

A Board Member Who Understood the Staff

(The article expected for this page was held up by illness of the board member who had agreed to provide it and who will submit it in a later issue of the BULLETIN. The Executive Director of the League has taken this opportunity to tell of the achievements of a board member known to him.)

The institution for dependent children to which she was devoted, like most child caring agencies, needed a warmer understanding between board members and workers. As a board member she brought a personality into her relationships which generated friendly responses from workers and children. Yet with all her tactfulness and affability she was ready to face unpleasant realities, whether these arose in her relations with the executive and staff or within the board itself.

The history of the institution was too spotted with unpleasant incidents often due to ignorance and weaknesses of staff. As might be expected, there was nearly a century of traditional distrust of staff by the board and a consequent development of attitudes too

authoritative, especially among some who had seen the longest service on the board. Why shouldn't they have that rigid inspectional relationship towards staff which frightened the timid workers and antagonized those who were more capable of cooperation?

To replace such an inspectional relationship with one which is characterized by education of both board and staff cannot be done by preaching. However disposed the executive and staff may be towards a more self-respecting and constructive sharing of administrative responsibilities there must be at least a nucleus of board members who are similarly inclined. It may also be essential for both staff and board to include those capable of considering change as a tonic. Too often we find self-protective and lazy workers and ultra-conservative board members to whom any radical change would seem poisonous.

The board member who inspired this article was quite as capable as any worker to participate in a far-reaching educational development. As cottage mothers were employed who had such education and poise as marked them above the old-fashioned matron-servant type of institutional worker, she was more than ready to treat them with the respect which their important tasks should rate. She encouraged other board members to replace commands with conferences. It soon became common for a cottage mother with good taste to be consulted, rather than ignored, by a committee responsible for the choice of new furnishings.

Under such conditions cottage mothers became less evasive. The most secure among them would be found sharing their problems as well as their achievements with one or two of the board. One of the natural consequences of such associations with the staff was for some of the friendliest of the board to follow with great interest that thawing out of a newly admitted child's emotional frigidity, an experience often skillfully controlled by competent institution workers. This particular board member and her associates, operating usually in the role of observers, became far more enthused about such work of the institution than in the days when their principal activities consisted of checking up on the quality of the housekeeping and the physical appearances of the children. They became such effective interpreters as the institution had not previously known.

It was through her participation in case conferences that this board member developed her greatest understanding of the staff and children. There she found all of the cottage parents, the recreation work-

Officers of the Child Welfare League Board

Jacob Kepcs, third Vice-President of the Child Welfare League of America, Inc., and at one time its President, has been active in the planning and directing of League activities over the past ten years. An immigrant from Czechoslovakia in 1906, he was educated at New York University and completed his professional education at the New York School of Social Work. His first professional position was with the S.P.C.C. of Philadelphia, and subsequently became the head of Fellowship House in New York City; Executive Secretary of the Jewish Children's Society of Baltimore, he then moved on to Chicago to head the Jewish Home Finding Society, later consolidated into the present Jewish Children's Bureau, of which he is now the Executive in charge. Not only is Mr. Kepcs in the role of a social case work practitioner, but that of educator as well. Since 1927 he has taught social service administration at the University of Chicago.

Mr. Kepcs was appointed a member of the White House Conference of 1930, to serve as a Vice-President of the Conference in 1940, and to represent the U. S. Government as a delegate to the Pan-American Conference on Child Welfare in Mexico in 1935. In connection with the development of child welfare services through the U. S. Children's Bureau, and in the planning of services under the Federal Social Security Act, he has been active on advisory committees.

In helping to organize the Joint Service Bureau for negro children in Chicago, the Children's and Minors' Service of the Chicago Relief Administration, the child placing service of the Illinois Training School for Boys at St. Charles, and continuing as chairman of the advisory committees of these respective agencies, he has rendered a lasting service to needy groups of children.

Mr. Kepcs has served on the Executive Committee of the National Conference of Social Work; the National Conference of Jewish Social Service, the Executive Committee of the American Association of Social Work; and in 1934 as President on the Illinois State Conference of Social Welfare.

ers, nurse and executive, under the leadership of a strong social worker, spending an hour or more together in studying the problems of one child and in planning for him. Such meetings, held once in two weeks, frequently would be attended by workers from other social agencies and by the principal or a teacher from the school where most of the children were enrolled. For the most part the board member again limited her participation to observation. But after a while she shared in discussion, her suggestions carrying no more and no less weight than if she had been a member of the staff.

It can be easily understood that when a child with serious problems gave notorious advertisement to the institution, this board member could reassure others among the board and friends of the institution that the misbehavior was not merely the willful act of a child or the fault of the staff. Having shared in discussion of his problems she knew that at least some of the failure was forecast by the neglect suffered before the child ever entered the institution. A board member thus aware of relations of the staff and children can cite cases of achievement which, with their happy endings, are in contrast to some immediate and appalling failures and which may suggest that there is still hope for the most seriously disturbed and misbehaving child.

This is a meager description of a situation in which several board members, and this one in particular, came to understand and respect the staff of the institution. It does not begin to describe in any detail the place of the case conference and other educational media which for years have been a part of the daily life in our strongest institutions.

—HOWARD W. HOPKIRK

Executive Director, Child Welfare League of America

Regional Conferences

New England Regional Conference will be held March 28 and 29 at the Hotel Commander, Cambridge, Mass. Miss Lucy A. Turner is Chairman.

Midwestern Regional Conference will be held April 17, 18 and 19 at the Hotel La Salle, Chicago, Illinois. Mr. M. K. Reckord is Chairman.

Available for Circulation

Society and the Individual: By Ruth Smalley, Associate Professor of Case Work, University of Pittsburgh.

I. The case worker's conflict in serving the person and the State, with particular emphasis upon its implications for professional education. *Social Work Today*, December, 1940.

II. Self-realization of individuals in the kind of society which makes such realization possible is the principal objective of social work. *Social Work Today*, January, 1941.

BOOK NOTES

THE PUBLIC HEALTH NURSE AND HER PATIENT: Ruth Gilbert, R.N., 396 pp. The Commonwealth Fund, New York, 1940. \$2.25.

The author of this excellent volume has had training and experience both as a public health nurse and psychiatric social worker. She uses her extensive psychiatric knowledge and insight to interpret to the public health nurse the mental hygiene potentialities of her work in the community. And in doing this, the author dwells at length on the nurses' opportunity to help parents rear their children so that they may become healthy individuals, emotionally as well as physically.

Social workers in the children's field are sometimes inclined to lose sight of the fact that the public health nurse plays a major role in child welfare. She has many contacts with parents and children in homes, schools, neighborhood clubs, Board of Health clinics, etc. The reviewer, whose experience has also included public health nursing and psychiatric social work, knows how often the nurse is called upon to assist the mother with all phases of child care and training. The author recognizes the fact that the nurse could be a potent force in mental hygiene work in the community and it is to this end that she has presented this exhaustive discussion of the psychological aspects of the nurse's work. She deals in turn with the individual patient, group work with parents, the pregnant woman, the nursing mother and the growth and development of the young child.

Assuming that the nurse is adequately equipped to deal with the medical aspects of her work, the author emphasizes the emotional factors and points out the potential dangers in the old authoritative approach. It is a psychiatric primer for the nurse and contains little that would be new to the trained social worker, but by virtue of its simplicity it presents much valuable material which the worker can use in her dealings with parents. In avoiding difficult, complex psychiatric interpretations, the author has evolved a huge reservoir of simple, homely approaches to the "every-day problems of the every-day child," and we might add the every-day parent. There is little here for the therapist who deals with pathological situations; the author did not intend to create therapists. The focus of the book is rather on preventive work with parents, probably the most vitally important work in the whole children's field.

Miss Gilbert discusses the problems and questions which the experienced worker has often met; those relating to pregnancy, the newborn infant, the "normal" rate of growth and development, the

timing and method of habit-training. She uses case material to illustrate each point and there is much on the question of development and habit-training which even the experienced worker will find helpful in teaching or group work and from which the young worker should benefit greatly. There is also an exhaustive bibliography which offers many leads for collateral reading.

The reviewer believes that those workers in the children's field who are on the alert for additions to their techniques will find in this book much that they can use in their daily work.

—ETHEL L. GINSBURG

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CHILD PSYCHOLOGY FOR PROFESSIONAL WORKERS: Florence M. Teagarden, Ph.D. Prentice-Hall, Inc., N. Y. 1940, 641 pp.

This book includes discussions of problems of heredity, of infant and child development, of the child's position in and relationship to his family. The chapters following deal with the dependent child, the child in school, the handicapped child and finally the emotional development, emotional disorders, the implications of sex and of intelligence.

The ambitious scope of this work is indicative of professional development in the past several years, and of the vast reference area from which the groups for whom this book has been written must draw. Social workers, visiting teachers, public health nurses, must meet this challenge if they are to do a comprehensive job in their respective fields.

The planning of the book is excellent. We find, however, that chapters are rather unevenly dealt with, since the author is apparently much more at home in some fields than in others. Chapters V and VIII, *The Pre-School Child and The Child Away From His Own Home*, are very good, whereas the chapter on heredity is poor. One would question the possibility of one author having the necessary thorough background and first-hand experiences in all fields. Our answer is in the negative. It would seem that in such an encyclopedic endeavor, where all fields are treated by the same author, this weakness would be unavoidable. Collaboration of several authors seems the only way out.

Furthermore, it must be recognized that however comprehensive, such a book can be no more than a gateway to further studies. Thus the references are very important. The approximately 1000 references, however, leave the reader sorely in need of some

classification, short captions or other road-signs as a guide. At present pamphlets destined for mothers or other clients are listed indiscriminately with professional standard books and with articles reporting highly specialized studies valuable only to the broadly trained members of the profession.

In almost all fields with which the book deals there have been great and fundamental changes going on for decades on which the experts are divided in their opinions. The author expounds both sides of some issues but fails to do so in others. For example: speaking of the I. Q. and its stability: "Dramatic reports of children with great changes of I. Q. sometimes get into literature." The author gives a good list of sources of possible errors but fails to report the new studies indicating significant changes in the tested intelligence which are associated with great environmental changes.

—LILLI PELLER

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Problems in the Placement of Illegitimate Children

(Continued from page 3)

move or because of behavior manifestations, is indication that the foster child is not deeply rooted in their personalities as is the own child. However, the foster home offers the young child more possibilities of normal development than does the institution, and a well-chosen foster home is less traumatic and distorting to the personality and more conducive to good citizenship than an insecure life with an unstable, poorly adjusted, irresponsible mother. It would therefore seem that the social agency is faced with a challenge as it selects foster homes in which it places children.

We cannot idealistically assume that by placing any child in any foster home we are offering him the equivalent of life with his own parents. It is more realistic to recognize that foster home care is a very special kind, a substitute method of helping a child who may be psychologically crippled by a lack of normal family relations. Often foster parents are so inadequately recompensed that the agency cannot hope to find suitable homes.

To find persons equipped not only in so far as possible to avert personality distortion, but to help children already so hurt, becomes the need and the challenging task of the child placing agency.